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MOTOR WINDSCREEN DAMAGE CLAIM FORM 汽車擋風玻璃損毀索償申請表

A. NOTES 注意事項

1. All questions must be answered. If not applicable, write "n/a".
   所有問題必須作答。如不適用者，請填上「不適用」。
2. The issue of this claim form is not an admission of liability by QBE Hongkong & Shanghai Insurance Ltd.
   發出此索償申請表並不代表昆士蘭聯保保險有限公司承認任何責任。
3. If there is insufficient space or further comment on any area is considered necessary, please use additional pages.
   若填報資料的位置不足，請填寫於附加紙上。
4. The repair of replacement of the motor windscreen must be done by a windscreen repairer specified in the policy.
   維修或更換汽車擋風玻璃必須由保單內註明之汽車擋風玻璃專門店負責。

B. DETAILS OF THE INSURED 保戶資料

Policy no. 保單號碼：	Name of the insured 保戶姓名：	
Address 地址：		
Home tel. no. 住宅電話：	Office tel. no. 辦公室電話：	Mobile tel. no. 流動電話：
Contact person 聯絡人姓名：	Email 電郵：	
Occupation / business 職業 / 行業：		

C. DETAILS OF THE INSURED VEHICLE 受保車輛資料

Registration no. 車輛登記號碼：	Make & model of the vehicle 廠名及款式：
Engine capacity 引擎容量：	Year of manufacture 製造年份：

D. PARTICULARS OF DAMAGE / ACCIDENT 損毀 / 意外詳情

Date 日期： / /	Place 地點：
Cause 原因：	

E. DECLARATION 聲明

I / We hereby declare that the foregoing particulars are true in all respects, that I / we have not withheld from QBE Hongkong & Shanghai Insurance Ltd. any information within my / our knowledge connected with the accident and that I /we have no other policy indemnifying me / us in respect of this accident. I /We understand and agree that the furnishing of this form to me / us by QBE Hongkong & Shanghai Insurance Ltd. does not constitute a waiver of any of their rights entitled under the terms and conditions of the policy.

本人 / 吾等謹此鄭重聲明上述各項資料全部屬實，本人 / 吾等並無對昆士蘭聯保保險有限公司隱瞞本人 / 吾等所知有關該意外之任何資料，而本人 / 吾等並無其他保單同時就此意外提供賠償。同時，本人 / 吾等明白及同意向本人 / 吾等提供此表格並不構成昆士蘭聯保保險有限公司豁免保單之條款及條件授予之任何權利。

Signature of the insured
保戶簽署：

(Please sign with company chop, if incorporated 如屬法團請蓋章)

Date
日期： / /

PERSONAL INFORMATION COLLECTION STATEMENT 收集個人資料聲明

The information you provide to us is collected to enable us to carry on insurance business and may be used for the purpose of any insurance or financial related product or service or any alterations, variations, cancellation or renewal of such product or service; any claim or investigation or analysis of such claim; and exercising any right of subrogation, and may be transferred to 1) any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation or other service provider providing services relevant to insurance business for any of the above or related purposes; 2) any association, federation or similar organization of insurance companies ("Federation") that exists or is formed from time to time for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably required in the interest of the insurance industry or any member(s) of the Federation, and 3) any members of the Federation by the Federation for any of the above or related purposes. Moreover, we are hereby authorized to obtain access to and/or to verify any of your data with the information collected by the Federation from the insurance industry. You have the right to obtain access to and to request correction of any personal information concerning yourself held by us. Requests for such access can be made in writing to the General Administration Officer, QBE Hongkong & Shanghai Insurance Limited, 17/F, Warwick House, West Wing, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong (Telephone: 2877 8488, Fax: 3607 0300)

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